

**SUPPLEMENTAL PAGE TO COMPENSATED LOBBYIST REGISTRATION** for \_\_\_\_\_  
*(List additional clients on this form)*

<b>Section B - Employers/Clients</b>			
Name of employer or client for whom you will lobby:		Name of employer or client for whom you will lobby:	
Business address:		Business address:	
Business phone number: (   )	Type of business:	Business phone number: (   )	Type of business:
<b>List at least one person responsible for the activities of the Employer or Client</b>		<b>List at least one person responsible for the activities of the Employer or Client</b>	
1.		1.	
2.		2.	
3.		3.	
4.		4.	
Referring to Section D of your registration, list all subject matters for which you anticipate performing lobbying activity of behalf of this employer/client:		Referring to Section D of your registration, list all subject matters for which you anticipate performing lobbying activity of behalf of this employer/client:	
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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title/Position (if signing for a Corporate Compensated Lobbyist)

\_\_\_\_\_  
Printed or Typed Name

\_\_\_\_\_  
Date